Please type a plus sign (+) inside this box---

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION TRANSMITTAL

First Inventor Tomonori INOUE

Attorney Docket No.

WRIST TYPE BLOOD PRESSURE METER CUFF

163852020700

(Only for new nonprovisional applications under 37 CF	R 1.53(b))	L
	Expres	ss Mail Label No.
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		Commissioner for Patents ADDRESS TO: 2011 South Clark Place Room 1B03, Crystal Plaza 2 Arlington, Virginia 22202
1.	·	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies
Background of the Invention Brief Summary of the Invention		ACCOMPANYING APPLICATIONS PARTS
- Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total S 5. Oath or Declaration [Total P a. Newly executed (original or copy) b. Copy from a prior application (37 CFR (for continuation/divisional with Box 18 com i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b). 6. X Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropata Sheet under 37 CFR 1.76: Continuation Divisional [Continuation or Divisional Continuation Continuat	ages] R 1.63(d)) pleted) on, riate box, and supply the Continuation-in-part (C	Group / Art Unit: e of the prior application, from which an oath or declaration is supplied g continuation or divisional application and is hereby incorporated by
reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS		
X Customer Number or Bar Code Label		or Correspondence address below
Name .		
Address		
City	State	Zip Code
Country	Telephone	Fax
Name (Print/Type) Bayry E. Bretschneider Registration No. (Attomey/Agent) 28,055		
Signature Signature Signature A Dall 2004		